MONTANA DEPARTMENT OF TRANSPORTATION

TRAFFICWAY VEHICLE SUMMARIES

SAFR009B

Page 1 of 15

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

Trafficway Summaries

Vehicle Summaries

Under "FATAL" IS Number of Contributing Circumstances identified in Fatal Crashes Under "TOTAL" IS Number of Contributing Circumstances identified in Fatal, Injury and Property Damage Crashes

* There may be 0,1 or more than one Contributing Circumstances identified per vehicle

Contributing

| Circumstances | INTERSTATE | IIS HIG | US HIGHWAY | | STATE HIGHWAY | | COUNTY ROADS | | LOCAL STREET | | ***TOTAL*** | |
|------------------------------|------------|---------|------------|-------|---------------|-------|--------------|-------|--------------|----|-------------|--|
| Involving Driver | TOTAL FA | | FATAL | TOTAL | | TOTAL | | TOTAL | FATAL | | FATAL | |
| NONE | | | | | | | | | | | | |
| OTHER*(DRIVER) | | | | 1 | | 1 | | | | 2 | 0 | |
| DRUGS | | | | | | | | 1 | | 1 | 0 | |
| ALCOHOL | | | | 4 | 1 | 2 | | 1 | | 7 | 1 | |
| FAILED TO YIELD RIGHT OF WAY | | | | | | | | | | | | |
| DISREGARDED TRAFFIC SIGNS | | | | 1 | 1 | | | | | 1 | 1 | |
| EXCEEDED STATED SPEED LIMIT | | | | | | | | | | | | |
| TOO FAST FOR CONDITIONS | 1 | | | 2 | | 1 | | | | 4 | 0 | |
| MADE AN IMPROPER TURN | | | | | | | | | | | | |
| WRONG SIDE OR WRONG WAY | | | | | | | | | | | | |
| FOLLOWED TOO CLOSELY | | | | | | | | | | | | |
| IMPROPER LANE CHANGE | | | | | | | | | | | | |
| IMPROPER BACKING OPERATION | | | | | | | | | | | | |
| IMPROPER PASSING | | | | | | | | | | | | |
| IMPROPER SIGNALS | | | | | | | | | | | | |
| IMPROPER PARKING | | | | | | | | | | | | |
| FELL ASLEEP, FAINTED ETC. | | | | 2 | | | | | | 2 | 0 | |
| LIC. REST. NOT COMPLIED | | | | | | | | | | | | |
| INATTENTIVE DRIVING | 1 | | | 1 | | 1 | | | | 3 | 0 | |
| CELL PHONE | | | | | | | | | | | | |
| CARELESS DRIVING | | | | 1 | | 2 | | 2 | | 5 | 0 | |
| NOT STATED | | | | | | | | | | | | |
| TOTAL | 2 | | | 12 | 2 | 7 | | 4 | | 25 | 2 | |

MONTANA DEPARTMENT OF TRANSPORTATION

Page 2 of 15

TRAFFICWAY VEHICLE SUMMARIES

SAFR009B

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

Trafficway Summaries

Vehicle Summaries

Under "FATAL" IS Number of Contributing Circumstances identified in Fatal Crashes Under "TOTAL" IS Number of Contributing Circumstances identified in Fatal, Injury and Property Damage Crashes

* There may be 0,1 or more than one Contributing Circumstances identified per vehicle

| Contributii | ng Circumstance |
|-------------|-----------------|
| Involvina E | Environment |

INTERSTATE US HIGHWAY STATE HIGHWAY COUNTY ROADS LOCAL STREET ***TOTAL***

TOTAL FATAL TOTAL FATAL TOTAL FATAL TOTAL FATAL TOTAL FATAL TOTAL FATAL TOTAL FATAL

FOG, SMOG, SMOKE

SLEET, HAIL

BLOWING SAND, SOIL, DIRT

SEVERE CROSSWINDS

RAIN, SNOW

SIGN OBSTRUCTION

VEGETATION OBSTRUCTION

SNOW BANK OBSTRUCTION

HILL OBSTRUCTION

BUILDING OBSTRUCTION

CURVE IN ROADWAY

SUN GLARE

OTHER*(ENVIRONMENT)

NOT STATED

TOTAL

MONTANA DEPARTMENT OF TRANSPORTATION

Page 3 of 15

TRAFFICWAY VEHICLE SUMMARIES

SAFR009B

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

| Contributing Circumstances | INTERSTATE | | US HIGH | US HIGHWAY | | STATE HIGHWAY | | COUNTY ROADS | | LOCAL STREET | | 'AL*** |
|----------------------------------|------------|-------|---------|------------|-------|---------------|-------|--------------|-------|--------------|-------|--------|
| Involving Other Person | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL |
| DRUGS | | | | | | | | | | | | |
| ALCOHOL | 1 | | | | | | | | | | 1 | 0 |
| FAILED TO YIELD ROW | | | | | | | | | | | | |
| DISREGARD TRAFFIC CONTROL DEVICE | Ε | | | | | | | | | | | |
| ILLEGALLY IN ROADWAY | | | | | | | | | | | | |
| BICYCLE VIOLATION | | | | | | | | | | | | |
| CLOTHING NOT VISIBLE | | | | | | | | | | | | |
| OTHER*(PERSON) | | | | | | | | | | | | |
| PED J-WALK | | | | | | | | | | | | |
| PED IN X-WALK | | | | | | | | | | | | |
| NOT STATED | | | | | | | | | | | | |
| TOTAL | 1 | | | | | | | | | | 1 | 0 |

MONTANA DEPARTMENT OF TRANSPORTATION

Page 4 of 15

TRAFFICWAY VEHICLE SUMMARIES

SAFR009B

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

Trafficway Summaries

Vehicle Summaries

Under "FATAL" IS Number of Contributing Circumstances identified in Fatal Crashes
Under "TOTAL" IS Number of Contributing Circumstances identified in Fatal, Injury and Property Damage Crashes

* There may be 0,1 or more than one Contributing Circumstances identified per vehicle

| Contributing Circumstances | | - | | | |
|--------------------------------|------------|------------------|--------------------------|-------------------|-------------|
| Involving Passenger | INTERSTATE | | STATE HIGHWAY COUNTY ROA | | ***TOTAL*** |
| | TOTAL F | ATAL TOTAL FATAL | TOTAL FATAL TOTAL F | 'ATAL TOTAL FATAL | TOTAL FATAL |
| DRUGS | | | | | |
| ALCOHOL | | | 1 1 | | 1 1 |
| OBSTRUCTED DRIVER'S VIEW | | | | | |
| OTHER DISTRACTION | | | | | |
| OTHER*(PASSENGER) | | | | | |
| NOT STATED | | | | | |
| TOTAL | | | 1 1 | | 1 1 |
| Contributing | | | | | |
| Circumstances | INTERSTATE | US HIGHWAY | STATE HIGHWAY COUNTY ROA | ADS LOCAL STREET | ***TOTAL*** |
| Involving Road | TOTAL F | ATAL TOTAL FATAL | TOTAL FATAL TOTAL F | ATAL TOTAL FATAL | TOTAL FATAL |
| WET | | | | | |
| ICY | 1 | | | | 1 0 |
| SLUSHY | | | | | |
| DEBRIS | | | | | |
| RUT, HOLES, BUMPS | | | | | |
| WORN, TRAVEL-POLISHED SURFACE | | | | | |
| ROAD UNDER CONSTRUCTION/MAINT. | | | | | |
| OBSTRUCTION | | | | | |
| TRAFFIC CONTROL INOPERATIVE | | | | | |
| SHOULDERS LOW, SOFT OR HIGH | | | | | |
| OTHER*(ROAD) | | | | | |
| NOT STATED | | | | | |
| TOTAL | 1 | | | | 1 0 |

MONTANA DEPARTMENT OF TRANSPORTATION

TRAFFICWAY VEHICLE SUMMARIES

SAFR009B

Page 5 of 15

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

Trafficway Summaries

Vehicle Summaries

Under "FATAL" IS Number of Contributing Circumstances identified in Fatal Crashes Under "TOTAL" IS Number of Contributing Circumstances identified in Fatal, Injury and Property Damage Crashes

* There may be 0,1 or more than one Contributing Circumstances identified per vehicle

Contributing

Circumstances INTERSTATE US HIGHWAY STATE HIGHWAY COUNTY ROADS LOCAL STREET ***TOTAL*** **Involving Vehicle** TOTAL FATAL TOTAL FATAL TOTAL FATAL TOTAL FATAL TOTAL FATAL TOTAL FATAL

BRAKES

STEERING

POWER PLANT

SUSPENSION

TIRES

EXHAUST

LIGHTS

SIGNALS WINDOWS

RESTRAINT SYSTEM

WHEELS

TRUCK COUPLING

CARGO

FUEL SYSTEM

OTHER*(VEHICLE)

NOT STATED

TOTAL

MONTANA DEPARTMENT OF TRANSPORTATION

TRAFFICWAY VEHICLE SUMMARIES

SAFR009B

Page 6 of 15

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

Trafficway Summaries

Vehicle Summaries

| Trailer Style | INTERSTATE | US HIGHWAY | STATE HIGHWAY | COUNTY ROADS | LOCAL STREET | ***TOTAL*** |
|--------------------------------|-------------|-------------|---------------|--------------|--------------|-------------|
| | TOTAL FATAI | TOTAL FATAL | TOTAL FATAL | TOTAL FATAL | TOTAL FATAL | TOTAL FAT. |
| NO TRAILER | 2 | | 6 | 1 3 | 2 | 13 |
| CAMPING TRAILER | | | | | | |
| MOBILE HOME | | | | | | |
| UTILITY TRAILER (3000 & Under) | | | | | | |
| UTILITY TRAILER(Over 3000) | | | | | | |
| SEMI CARGO TRAILER | | | | | | |
| FULL CARGO TRAILER | | | | | | |
| POLE TRAILER | | | | | | |
| TWO TRAILER UNIT | | | | | | |
| THREE TRAILER UNIT | | | | | | |
| FIFTH WHEEL | | | | | | |
| BOAT TRAILER | | | | | | |
| TWO TRAILER UNIT RECREATIONAL | | | | | | |
| OTHER | | | | | | |
| NOT STATED | | | | | | |
| TOTAL | 2 | | 6 | 1 3 | 2 | 13 |
| Vehicle By | | | | | | |
| Damage Severity | INTERSTATE | US HIGHWAY | STATE HIGHWAY | COUNTY ROADS | LOCAL STREET | ***TOTAL*** |
| | TOTAL FATAI | TOTAL FATAL | TOTAL FATAL | TOTAL FATAL | TOTAL FATAL | TOTAL FATA |
| DISABLING DAMAGE | 1 | | 5 | 1 1 | | 7 |
| FUNCTIONAL DAMAGE | 1 | | | 1 | | 2 |
| OTHER MOTOR VEHICLE DAMAGE | | | | | | |
| NO DAMAGE | | | | | | |
| NOT STATED | | | 1 | 1 | 2 | 4 |
| TOTAL | 2 | | 6 | 1 3 | 2 | 13 |

MONTANA DEPARTMENT OF TRANSPORTATION

TRAFFICWAY VEHICLE SUMMARIES

SAFR009B

Page 7 of 15

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

Trafficway Summaries

Vehicle Summaries

Under "FATAL" IS Number of Vehicles involved in Fatal Crashes Under "TOTAL" IS Number of Vehicles involved in All Crashes

Vehicle By **Body Style**

| Body Style | INTERST | ATE | US HIGH | WAY | STATE H | IGHWAY | COUNTY | ROADS | LOCAL ST | TREET | ***T(| OTAL*** |
|---------------------------|---------|-------|---------|-------|---------|--------|--------|-------|----------|-------|-------|---------|
| | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL |
| PASSENGER CAR (UNKNOWN) | | | | | | | 1 | | 2 | | 3 | 0 |
| VAN | 1 | | | | | | | | | | 1 | 0 |
| BUS | | | | | | | | | | | | |
| SCHOOL BUS | | | | | | | | | | | | |
| PICKUP (CATEGORY UNKNOWN) | | | | | 1 | | | | | | 1 | 0 |
| TRUCK/TRUCK-TRACTOR | | | | | | | | | | | | |
| MOTORHOME | | | | | | | | | | | | |
| MOTORCYCLE | | | | | | | | | | | | |
| AMBULANCE | | | | | | | | | | | | |
| FARM TRACTOR | | | | | | | | | | | | |
| CONSTRUCTION EQUIPMENT | | | | | | | | | | | | |
| PICKUP WITH CAMPER | | | | | | | | | | | | |
| BICYCLE | | | | | | | | | | | | |
| SNOWMOBILE | | | | | | | | | | | | |
| OTHER | | | | | | | | | | | | |
| FIRE TRUCK | | | | | | | | | | | | |
| SMALL PICKUP | | | | | 1 | | | | | | 1 | 0 |
| STANDARD PICKUP | | | | | 1 | | 1 | | | | 1 | 1 |
| SUBCOMPACT CAR | | | | | | | | | | | | |
| COMPACT CAR | 1 | | | | 1 | | 1 | | | | 3 | 0 |
| MID SIZE CAR | | | | | 2 | | | | | | 2 | 0 |
| LARGE PASSENGER CAR | | | | | | | | | | | | |
| SMALL STATION WAGON | | | | | | | | | | | | |
| MID SIZE STATION WAGON | | | | | | | | | | | | |
| LARGE STATION WAGON | | | | | | | | | | | | |
| MOPED | | | | | | | | | | | | |

MONTANA DEPARTMENT OF TRANSPORTATION

TRAFFICWAY VEHICLE SUMMARIES

SAFR009B

Page 8 of 15

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

Trafficway Summaries

Vehicle Summaries

| Vehicle By | y |
|------------|---|
|------------|---|

| Body Style | INTERSTATI | INTERSTATE | | US HIGHWAY | | STATE HIGHWAY | | COUNTY ROADS | | CREET | ***TOTAL*** | |
|-------------------|------------|------------|-------|------------|-------|---------------|-------|--------------|-------|-------|-------------|-------|
| | TOTAL F | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL |
| MINI VAN | | | | | | | | | | | | |
| suv | | | | | | | 1 | | | | 1 | 0 |
| TOW TRUCK | | | | | | | | | | | | |
| WORK CONSTRUCTION | | | | | | | | | | | | |
| UNKNOWN | | | | | | | | | | | | |
| NOT STATED | | | | | | | | | | | | |
| TOTAL | 2 | | | | 6 | 1 | . 3 | | 2 | | 13 | 1 |
| | | | | | | | | | | | | |

Page 9 of 15

TRAFFICWAY VEHICLE SUMMARIES

SAFR009B

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

Trafficway Summaries

NEBRASKA

Vehicle Summaries

| Vehicle By | INTERST | ATE | US HIGH | WAY | STATE H | IGHWAY | COUNTY | ROADS | LOCAL S' | TREET | ***TOTAL*** | | |
|---------------|---------|-------|---------|-------|---------|--------|--------|-------|----------|-------|-------------|---|--|
| Registration | TOTAL | FATAL | | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | | |
| ALABAMA | | | | | | | | | | | | | |
| ALASKA | | | | | | | | | | | | | |
| ARIZONA | | | | | | | | | | | | | |
| ARKANSAS | | | | | | | | | | | | | |
| CALIFORNIA | | | | | | | | | | | | | |
| COLORADO | | | | | | | | | | | | | |
| CONNECTICUT | | | | | | | | | | | | | |
| DELAWARE | | | | | | | | | | | | | |
| FLORIDA | | | | | | | | | | | | | |
| GEORGIA | | | | | | | | | | | | | |
| IIAWAH | | | | | | | | | | | | | |
| IDAHO | | | | | 1 | | | | | | 1 | 0 | |
| ILLINOIS | | | | | | | | | | | | | |
| INDIANA | | | | | | | | | | | | | |
| IOWA | | | | | | | | | | | | | |
| KANSAS | | | | | | | | | | | | | |
| KENTUCKY | | | | | | | | | | | | | |
| LOUISIANA | | | | | | | | | | | | | |
| MAINE | | | | | | | | | | | | | |
| MARYLAND | | | | | | | | | | | | | |
| MASSACHUSETTS | | | | | | | | | | | | | |
| MICHIGAN | | | | | | | | | | | | | |
| MINNESOTA | | | | | | | | | | | | | |
| MISSISSIPPI | | | | | | | | | | | | | |
| MISSOURI | | | | | | | | | | | | | |
| MONTANA | 1 | | | | 5 | 1 | 1 3 | | 1 | | 10 | 1 | |

MONTANA DEPARTMENT OF TRANSPORTATION

SAFR009B

Page 10 of 15

TRAFFICWAY VEHICLE SUMMARIES

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

Trafficway Summaries

Vehicle Summaries

Under "FATAL" IS Number of Vehicles involved in Fatal Crashes Under "TOTAL" IS Number of Vehicles involved in All Crashes

| Vehicle By | INTERSTATE | US HIGHWAY | STATE HIGHWAY | COUNTY ROADS | LOCAL STREET | ***TOTAL*** |
|--------------|-------------|-------------|---------------|--------------|--------------|-------------|
| Registration | TOTAL FATAL | TOTAL FATAL | TOTAL FATAL | TOTAL FATAL | TOTAL FATAL | TOTAL FATAL |

NEVADA

NEW HAMPSHIRE

NEW JERSEY

NEW MEXICO

NEW YORK

NORTH CAROLINA

NORTH DAKOTA

OHIO

OKLAHOMA

OREGON

PENNSYLVANIA

RHODE ISLAND

SOUTH CAROLINA

SOUTH DAKOTA

TENNESSEE

TEXAS

UTAH VERMONT

VIRGINIA

WASHINGTON

WEST VIRGINIA

WISCONSIN 1 0 1

WYOMING

DISTRICT OF COULMBIA

U.S. GOVERNMENT

GUAM

PUERTO RICO

MONTANA DEPARTMENT OF TRANSPORTATION

TRAFFICWAY VEHICLE SUMMARIES

SAFR009B

Page 11 of 15

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

Trafficway Summaries

Vehicle Summaries

| Vehicle By | INTERST | ATE | US HIGH | WAY | STATE H | IGHWAY | COUNTY | ROADS | LOCAL S | TREET | ***TO | TAL*** |
|-----------------------|---------|-------|---------|-------|---------|--------|--------|-------|---------|-------|-------|--------|
| Registration | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL |
| VIRGIN ISLANDS | | | | | | | | | | | | |
| ALBERTA | | | | | | | | | | | | |
| BRITISH COLUMBIA | | | | | | | | | | | | |
| MANITOBA | | | | | | | | | | | | |
| NEWFOUNDLAND | | | | | | | | | | | | |
| NEW BRUNSWICK | | | | | | | | | | | | |
| NOVA SCOTIA | | | | | | | | | | | | |
| ONTARIO | | | | | | | | | | | | |
| PRINCE EDWARD ISLAND | | | | | | | | | | | | |
| QUEBEC | | | | | | | | | | | | |
| SASKATCHEWAN | | | | | | | | | | | | |
| NORTHWEST TERRITORIES | | | | | | | | | | | | |
| CITY EXEMPT | | | | | | | | | | | | |
| STATE EXEMPT | | | | | | | | | | | | |
| COUNTY EXEMPT | | | | | | | | | | | | |
| FOREIGN COUNTRY | | | | | | | | | | | | |
| NOT STATED | | | | | | | | | 1 | | 1 | 0 |
| TOTAL | 2 | | | | 6 | 1 | L 3 | 1 | 2 | | 13 | 1 |

MONTANA DEPARTMENT OF TRANSPORTATION

SAFR009B

Page 12 of 15

TRAFFICWAY VEHICLE SUMMARIES

TOTAL

LOCAL STREET

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

STATE HIGHWAY COUNTY ROADS

Trafficway Summaries

Vehicle By

Vehicle Summaries

Under "FATAL" IS Number of Vehicles involved in Fatal Crashes Under "TOTAL" IS Number of Vehicles involved in All Crashes

INTERSTATE

US HIGHWAY

| First Harmful Event | INTERSTATE | US HIGHWAY | STATE HIGHWAY | COUNTY ROADS | LOCAL STREET | * * * TO] | TAL*** |
|--------------------------------|-------------|-------------|---------------|--------------|--------------|-----------|--------|
| First Harmful Event | TOTAL FATAL | TOTAL FATAL | TOTAL FATAL | TOTAL FATAL | TOTAL FATAL | TOTAL | FATAL |
| OVERTURN | 1 | | 2 1 | 1 | | 4 | 1 |
| FIRE/EXPLOSION | | | | | | | |
| IMMERSION | | | | | | | |
| JACKKNIFE | | | | | | | |
| OTHER NONCOLLISION | | | | | | | |
| PEDESTRIAN | | | | | | | |
| PEDALCYCLE | | | | | | | |
| RAILWAY TRAIN | | | | | | | |
| MV IN TRANSPORT | | | | | | | |
| MV IN TRANSPORT ON OTHER RDWAY | | | | | | | |
| PARKED MV | | | | | | | |
| MV AT RR XING | | | | | | | |
| WILD ANIMAL | | | | | | | |
| DOMESTIC ANIMAL | | | 1 | | | 1 | 0 |
| OTHER OBJ. NOT FIXED | | | 1 | | | 1 | 0 |
| IMPACT ATTENUATOR | | | | | | | |
| BRIDGE/PIER/ABUTMENT | | | | | | | |
| BRIDGE PARAPET END | | | | | | | |
| BRIDGE RAIL | | | | | | | |
| GUARDRAIL FACE | | | | | | | |
| GUARDRAIL END | | | 1 | | | 1 | 0 |
| MEDIAN BARRIER | | | | | | | |
| HWY. TRAFFIC SIGN POST | | | | | | | |
| OVERHEAD SIGN SUPPORT | | | | | | | |
| LUMINAIRE/LIGHT SUPPORT | | | | | | | |
| UTILITY POLE | | | | | | | |
| OTHER POST | | | | | | | |
| | | | | | | | |

MONTANA DEPARTMENT OF TRANSPORTATION

SAFR009B

Page 13 of 15

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

TRAFFICWAY VEHICLE SUMMARIES

Trafficway Summaries

Vehicle Summaries

| Vehicle By | INTERSTATE | | US HIGHWAY | | STATE HIGHWAY | | COUNTY ROADS | | LOCAL STREET | | ***TOTAL*** | |
|---------------------|------------|-------|------------|-------|---------------|-------|--------------|-------|--------------|-------|-------------|-------|
| First Harmful Event | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL |
| CULVERT | | | | | | | | | | | | |
| CURB | | | | | | | | | | | | |
| DITCH | | | | | | | | | 1 | | 1 | 0 |
| EMBANKMENT | | | | | | | | | | | | |
| FENCE | 1 | | | | 1 | | 2 | | | | 4 | 0 |
| MAIL BOX | | | | | | | | | | | | |
| TREE | | | | | | | | | | | | |
| OTHER FIXED OBJECT | | | | | | | | | 1 | | 1 | 0 |
| ROCK OR BOULDER | | | | | | | | | | | | |
| UNKNOWN | | | | | | | | | | | | |
| NOT STATED | | | | | | | | | | | | |
| TOTAL | 2 | | | | 6 | 1 | . 3 | | 2 | | 13 | 1 |
| | | | | | | | | | | | | |

LOCAL STREET

TOTAL

Page 14 of 15

TRAFFICWAY VEHICLE SUMMARIES

SAFR009B

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

STATE HIGHWAY COUNTY ROADS

Trafficway Summaries

Vehicle By

Vehicle Summaries

Under "FATAL" IS Number of Vehicles involved in Fatal Crashes Under "TOTAL" IS Number of Vehicles involved in All Crashes

INTERSTATE

US HIGHWAY

| Most Harmful Event | INTERSTATE US HIGHWAY | | | STATE HIGHWAY | | COUNTY ROADS | | LOCAL STREET | | ***TOTAL*** | | | | |
|--------------------|--------------------------------|-------|-------|---------------|-------|--------------|-------|--------------|-------|-------------|-------|-------|---|--|
| | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | | |
| | OVERTURN | 1 | | | | 2 | 1 | . 1 | | | | 4 | 1 | |
| | FIRE/EXPLOSION | | | | | | | | | | | | | |
| | IMMERSION | | | | | | | | | | | | | |
| | JACKKNIFE | | | | | | | | | | | | | |
| | OTHER NONCOLLISION | | | | | | | | | | | | | |
| | PEDESTRIAN | | | | | | | | | | | | | |
| | PEDALCYCLE | | | | | | | | | | | | | |
| | RAILWAY TRAIN | | | | | | | | | | | | | |
| | MV IN TRANSPORT | | | | | | | | | | | | | |
| | MV IN TRANSPORT ON OTHER RDWAY | | | | | | | | | | | | | |
| | PARKED MV | | | | | | | | | | | | | |
| | MV AT RR XING | | | | | | | | | | | | | |
| | WILD ANIMAL | | | | | | | | | | | | | |
| | DOMESTIC ANIMAL | | | | | 1 | | | | | | 1 | 0 | |
| | OTHER OBJ. NOT FIXED | | | | | 1 | | | | | | 1 | 0 | |
| | IMPACT ATTENUATOR | | | | | | | | | | | | | |
| | BRIDGE/PIER/ABUTMENT | | | | | | | | | | | | | |
| | BRIDGE PARAPET END | | | | | | | | | | | | | |
| | BRIDGE RAIL | | | | | | | | | | | | | |
| | GUARDRAIL FACE | | | | | | | | | | | | | |
| | GUARDRAIL END | | | | | 1 | | | | | | 1 | 0 | |
| | MEDIAN BARRIER | | | | | | | | | | | | | |
| | HWY. TRAFFIC SIGN POST | | | | | | | | | | | | | |
| | OVERHEAD SIGN SUPPORT | | | | | | | | | | | | | |
| | LUMINAIRE/LIGHT SUPPORT | | | | | | | | | | | | | |
| | UTILITY POLE | | | | | | | 1 | | | | 1 | 0 | |
| | OTHER POST | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |

MONTANA DEPARTMENT OF TRANSPORTATION

SAFR009B

Page 15 of 15

Start Date 01-JAN-2005 End Date 31-DEC-2007 Select AC_COUNTY_CODE = '45' AND (EXISTS (SELECT NULL FROM ACCIDENT.OCCUPANT WHERE OC_SEAT_POS_CODE = '11' AND OC_ALCOHOL_DRUGS_CODE IN ('1','2','3') AND (AC_ACCID_NO = OC_ACCID_NO)))

TRAFFICWAY VEHICLE SUMMARIES

Trafficway Summaries

Vehicle Summaries

| Vehicle By | INTERSTATE | | US HIGHWAY | | STATE HIGHWAY | | COUNTY ROADS | | LOCAL STREET | | ***TOTAL*** | |
|--------------------|------------|-------|------------|-------|---------------|-------|--------------|-------|--------------|-------|-------------|-------|
| Most Harmful Event | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL | TOTAL | FATAL |
| CULVERT | | | | | | | | | | | | |
| CURB | | | | | | | | | | | | |
| DITCH | | | | | | | | | 1 | | 1 | 0 |
| EMBANKMENT | | | | | | | | | | | | |
| FENCE | 1 | | | | 1 | | 1 | | | | 3 | 0 |
| MAIL BOX | | | | | | | | | | | | |
| TREE | | | | | | | | | | | | |
| OTHER FIXED OBJECT | | | | | | | | | 1 | | 1 | 0 |
| ROCK OR BOULDER | | | | | | | | | | | | |
| UNKNOWN | | | | | | | | | | | | |
| NOT STATED | | | | | | | | | | | | |
| TOTAL | 2 | | | | 6 | 1 | . 3 | | 2 | | 13 | 1 |